

CITY OF TITUSVILLE, PA FOOD ESTABLISHMENT INSPECTION REPORT

CITY OF TITUSVILLE DEPARTMENT OF HEALTH		No. of Risk Factor/Interventions Violations		Date	7/19/18
		No. of Repeat Risk Factor/Intervention/Violations		Current Expiration	7/13/2018
Establishment McDonald's #04498		Location 420 S Franklin St		Phone	
License / Permit #	Contact/Permit Holder Lyndsay Diehl	Purpose of Inspection <u>Routine</u> Follow-up	Est Type FS <u>RS</u>	Risk Category <u>High</u> Medium Low	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.
IN = in compliance **OUT** = not in compliance **N/O** = not observed **N/A** = not applicable **COS** = corrected on-site during inspection **R** = repeat violation

Compliance Status		COS	R	Compliance Status		COS	R
Demonstration of Knowledge							
1	IN OUT	Certification by accredited program, compliance with Code, or correct responses			16	IN OUT N/A N/O	Proper cooking time & temperatures
					17	IN OUT N/A N/O	Proper reheating proc for hot holding
Employee Health							
2	IN OUT	Management awareness; policy present			18	IN OUT N/A N/O	Proper cooling time & temperatures
					19	IN OUT N/A N/O	Proper hot holding temperatures
3	IN OUT	Proper use of reporting, restriction & exclusion			20	IN OUT N/A	Proper cold holding temperatures
					21	IN OUT N/A N/O	Proper date marking & disposition
Good Hygienic Practices							
4	IN OUT N/O	Proper eating, tasting, drinking, or tobacco use			22	IN OUT N/A N/O	Time as public health control; proc & rec
5	IN OUT N/O	No discharge from eyes, nose, and mouth					
Preventing Contamination by Hands							
6	IN OUT N/O	Hands clean & properly washed			23	IN OUT N/A	Consumer advisory provided for raw or undercooked foods
7	IN OUT N/A N/O	No bare hand contact with RTE foods or approved alternate method properly followed			Highly Susceptible Populations		
					24	IN OUT N/A	Pasteurized foods used; prohibited foods not offered
8	IN OUT	Adequate handwashing facilities supplied & accessible					
Approved Sources							
9	IN OUT	Food obtained from approved source			25	IN OUT N/A	Food additives: approved & properly used
					26	IN OUT N/A	Toxic substances properly identified, stored & used
10	IN OUT N/A N/O	Food received at proper temperature					
11	IN OUT	Food in good condition, safe & unadulterated			Conformance with Approved Procedures		
					27	IN OUT N/A	Compliance with variance, specialized process, & HACCP plan
12	IN OUT N/A N/O	Required records available: shelf stock tags, parasite destruction					
Protection from contamination							
13	IN OUT N/A	Food separated & protected			Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury.		
14	IN OUT N/A	Food-contact surfaces: cleaned & sanitized					
15	IN OUT	Proper disposition of returned, previously served, reconditioned & unsafe food					

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals and physical objects into foods. Mark "X" in box if numbered item is not in compliance. Mark "X" in appropriate box for COS and/or R. **COS**=corrected on-site during inspection **R**=repeat violation

		COS	R			COS	R	
Safe Food and Water								
28	Pasteurized eggs used where required			41	In-use utensils: properly stored			
	Water & ice from approved source				42	Utensils, equip & linens: properly stored, dried & handled		
	Variance obtained for specialized processing methods				43	Single-use & single-service articles: properly stored & used		
Food Temperature Control								
31	Proper cooling methods used; adequate equipment for temperature control			44	Gloves used properly			
	Plant food properly cooked for hot holding				Utensils, Equipment and Vending			
	Approved thawing methods used				45	Food & non-food contact surfaces cleanable, properly designed, constructed & used		
32	Plant food properly cooled for hot holding			46	Warewashing facilities: installed, maintained, used: test strips			
	Thermometers provided & accurate				47	Non-food contact surfaces clean		
Food Identification								
35	<input checked="" type="checkbox"/> Food properly labeled; original container			48	Hot & cold water available; adequate pressure			
					49	Plumbing installed; proper backflow devices		
Prevention of Food Contamination								
36	<input checked="" type="checkbox"/> Insects, rodents & animals not present; no unauthorized persons			50	Sewage & waste water properly disposed			
					51	Toilet facilities: properly constructed, supplied & cleaned		
37	Contamination prevented during prep, storage & display			52	Garbage & refuse properly disposed; facilities maintained			
	Personal cleanliness				53	Physical facilities installed, maintained & clean		
38	Wiping cloths: properly used & stored			54	Adequate ventilator & lighting: designated areas used			
39								
40								

Person in Charge (Signature) _____

Inspector (Signature) _____

 Follow-up: YES NO (Circle one)

Follow-up Date: _____

APPROVED

NEW

RE-NEW

RE-INSPECT

FOOD ESTABLISHMENT INSPECTION REPORT

CITY OF TITUSVILLE DEPARTMENT OF HEALTH		GREASE TRAP INSTALLED <div style="display: flex; justify-content: space-around;"> <input checked="" type="radio"/> Yes <input type="radio"/> No </div>	Date <u>7/18/18</u>
Establishment McDonald's #04498	Address/City/State/Zip Code 420 S Franklin St		Phone

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Milk	38.0	Walk-in			
Chicken	-3	Freezer			
Hamburg	148	Hot Hold			
Nuggets	137	Hot Hold			
Chix Patty	142	Hot Hold			
FEC	Yes				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.
35	Plastic bottle at grillside not labeled as to content.
36	Fresh and dried rodent droppings on the floor behind the washing machine where there is also a rodent gnawed pack of stool. Droppings were also observed at the floor/wall juncture throughout the rear storage area.
49	Drain line beneath the ice machine is inserted into the floor drain with no air gap.
53	Dried food spillage accumulated on floor behind the grease trap.
53	Grease dripping from grill brush accumulated on the floor beneath the hanging grill brush.
	Re-inspection to be conducted at additional fee to fix

Person in Charge (Signature) <u><i>Walter</i></u>	Date: <u>7/18/2018</u>
Inspector (Signature) <u><i>[Signature]</i></u>	Date: <u>7/19/18</u>